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MAIL STOP AMENDMENT	Kenneth F. Smolik
COMPANY:	DATE:
USPTO	January 7, 2005
FAX NO.:	TOTAL NO. OF PAGES: (including cover sheet)
(703) 872-9306	21
YOUR REFERENCE NO.:	OUR REFERENCE (C/M) NO.:
09/626,100	005222.00358
RE:	In re: Appln. Adam M. Gersting Appln. No. 09/626,100 Filed: July 26, 2000 For: Method and System for Content Management Assessment, Planning and Delivery

## OFFICIAL FAX

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Jasmin Santoyo	312-463-5560

Amendment

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FORM

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Total Number of Pages in This Submission	21	Attorney Docket Number	005222.00358
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## ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Alter Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief Repl. Brief)
<input type="checkbox"/> Alter Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Fax Cover Sheet
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

[Remarks] A duplicate of this sheet is enclosed.

The Commissioner is authorized to debit or credit any overpayment or deficiency from our Deposit Account No. 19-0733.

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm	Banner & Witcoff, LTD.		
Signature			
Printed Name	Kenneth F. Smolik		
Date	01/07/2005	Reg. No.	44,344

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Typed or printed name	Jasmin Santoyo
Date	01/07/2005

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Total Number of Pages in This Submission

Application Number	09/626,100
Filing Date	07/26/2000
First Named Inventor	Adam M. Gersting
Art Unit	3623
Examiner Name	Boyce, Andre D.
Total Number of Pages in This Submission	21
Attorney Docket Number	005222.00358

## ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Interrogatory Panel	<input type="checkbox"/> Appeal Communication to Board
<input type="checkbox"/> Assignment/Reply	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Response Communication to TC (Appeal Notice, Brief Repl. Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Proprietary Information
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<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Request for Refund	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> CD, Number of CD(s): _____	Fax Cover Sheet
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application		
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

[Remarks] A duplicate of this sheet is enclosed.

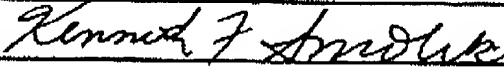
The Commissioner is authorized to debit or credit any overpayment or deficiency from our Deposit Account No. 19-0733.

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

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Signature



Printed Name

Kenneth F. Smolik

Date

01/07/2005

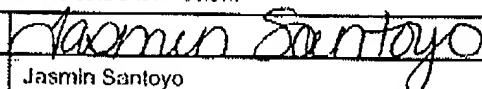
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JAN 07 2005

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
(Attorney Docket No. 005222.00358)

In re application of: )  
Gersting, et al. ) Art Unit: 3623  
Serial No. 09/626,100 )  
Filed: July 26, 2000 ) Examiner: Andre D. Boyce  
For: METHOD AND SYSTEM FOR )  
CONTENT MANAGEMENT )  
ASSESSMENT, PLANNING )  
AND DELIVERY )

AMENDMENT

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated October 8, 2004, please enter the following response. The Examiner set a three-month period for response, thus making this Amendment due on or before January 8, 2005. The Commissioner is authorized to charge any fees to Deposit Account No. 19-0733.

**Amendments to the Claims** are reflected in the listing of claims, which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 15 of this paper.